

# L18000050234

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H18000065983 3)))



H18000065983ABC7

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
 Fax Number : (850)617-6381

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
 Account Number : I20000000019  
 Phone : (305)552-5973  
 Fax Number : (305)675-5944

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

18 FEB 27 AM 8:59

FILED

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

RECEIVED

2018 FEB 27 PM 2:40

FLORIDA

### FLORIDA LIMITED LIABILITY CO. SERENITY GROUP HOME NETWORK LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

H18000065983

**ARTICLES OF ORGANIZATION**  
**FOR**  
**FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company," "LLC," or "LC.")

SERENITY GROUP HOME NETWORK LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

660 AVENUE NORTH SE  
WINTER HAVEN, FL 33880

**ARTICLE III - Registered Agent, Registered Office:**

The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

ROLANDO MARQUEZ  
660 AVENUE NORTH SE  
WINTER HAVEN, FL 33880

**ARTICLE IV-**

The name and title of each person authorized to manage and control the Limited Liability Company:

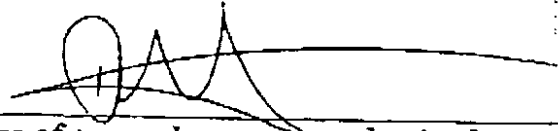
ROLANDO MARQUEZ (AMBR)  
FREDDY D CABRERA (AMBR)  
   
   
   
   
 

FILED  
18 FEB 27 AM 8:59  
STATE OF FLORIDA  
TALLAHASSEE COUNTY

H18000065983

**Required Signatures:**

H18000065983



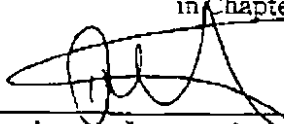
Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

ROLANDO MARQUEZ

Typed or printed name of signee

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.



Registered Agent's Signature (REQUIRED)

FILED  
18 FEB 27 AM 8:59  
STATE OF FLORIDA  
TALLAHASSEE

H18000065983